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Applicant: Nicholas M. DiTrollo
Application No.: 10/632,458
Confirmation No.: 3803
Filed: July 31, 2003
Title: Foot-Operated Pipette Dispenser
Group: 2856
Examiner: David A. Rogers

Our File: DSC-PT012.1

Date: December 6, 2005

**To: Office of Patent Publication
Issue Fee Transmission**

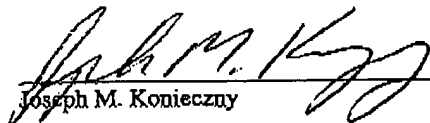
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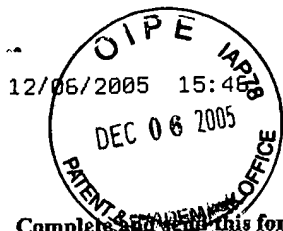
TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/632,458	
	Filing Date	07/31/2003	
	First Named Inventor	Nicholas M. DiTrollo	
	Art Unit	2856	
	Examiner Name	David A. Rogers	
Total Number of Pages In This Submission	3	Attorney Docket Number	DSC-PT012.1

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Form PTO-2038
Remarks _____		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Joseph M. Konieczny, P.C.	
Signature	<i>Joseph M. Konieczny</i>	
Date	12/06/2005	

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Signature	<i>Joseph M. Konieczny Sr.</i>	Date	12/06/2005

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Joseph M. Konieczny, Sr. (Depositor's name)
Joseph M. Konieczny, Sr. (Signature)
12-6-2005 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/632,458	07/31/2003	Nicholas M. DiTrollo	DSC-PT012.1	3803

TITLE OF INVENTION: FOOT-OPERATED PIPETTE DISPENSER

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	12/08/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
ROGERS, DAVID A	2856	073-864150

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Joseph M. Konieczny, Sr.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Drummond Scientific Company

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Broomall, Pennsylvania

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

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5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Joseph M. Konieczny, Sr.
Joseph M. Konieczny, Sr.

Date

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